## **ORDER FORM**



Order by mail: MCPUBS, CA Dept of Health Services

1501 Capitol Avenue, MS 4600

P.O. Box 997417

Sacramento, CA 95899-7417

**FAX your order to**: (916) 552-9478

Email your order to: MCPUBS@DHS.CA.GOV

Please specify delivery address for requested materials:  Organization Name / Individual Name:		APPLICATIONS Maximum 320	HANDBOOKS Maximum 320	
Business Address:  City: Zip Code:  Delivery Address (if different) P.O. Boxes will not be accepted:  City: Zip Code:  Name of Contact Person:  Phone: Fax:		Armenian Cambodian Chinese English Farsi Hmong Korean Lao Russian Spanish Vietnamese Publication 406 <sup>1</sup>	Armenian Cambodian Chinese English Farsi Hmong Korean Lao Russian Spanish Vietnamese	
Organization Category Please indicate the category your organization represents and provide requested information:  EE# (required)  CAA# (required)	Applications and Handbooks Please allow 5 to 7 working days for standard delivery at no cost.  SPECIAL DELIVERY REQUEST You may request to have shipped at your cost by:		(PUB 85)  • English/Spanish Pad	
County Department Name School/District Name Provider Name HF/MC Contractor's Name	UPS FedEx Other  Preferred Method: Overnight 2-Day  Ground	Please allow 4 to 5 weeks for standard delivery at no cost  No Special Delivery Requests  1. PUB 406 is only necessary if you have applications that need new income levels.  2. Available free of charge in limited quantities. May be discontinued without notice.		
	Your Billing Authorization/Account #			

MC 370 (01/06)